

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED

2014 JAN 23 AM 10:01

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5C MAIL CENTER

BEN FRASIER FOR CONGRESS

ADDRESS (number and street)

POST OFFICE BOX 304

Check if different  
than previously  
reported. (ACC)

JOHN IS ISLAND

SC

29451-0031

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

3. IS THIS  
REPORT

NEW  
(N)

OR

A

AMENDED  
(A)

SC

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

X General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

06 08 2010

in the  
State of

SC

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

10 01 2013

through

12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BEN FRASIER (ASSISTANT TREASURER)

Signature of Treasurer

*Ben Frasier*

Date

01 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)